Idaho Beer Wholesalers Report of Beer Purchases

- FORM BR 1601

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Name	Employer I.D. No.
Turno (Zimpioyor ii.D. 110.
Tax Period	Permit Number

Only wholesalers complete this form. Breweries do not use this form.

Enter the purchases you have made during the month from manufacturers, importers and other wholesalers.

INSTRUCTIONS: You must list the company name, reporting permit number, invoice date and invoice number of each transaction. You must report TOTAL GALLONS ONLY below. You may use the worksheet on the back of this form to report the number of packages received (columns 2 through 19). Convert to gallons and carry the amounts to TOTAL GALLONS, below, for each invoice. For each vendor invoice you must enter the vendor name, reporting permit number (see instructions), the invoice date on the VENDOR'S INVOICE, the vendor invoice number (DO NOT USE YOUR OWN P.O. OR CHECK NUMBER), and the amount purchased. (Remember - if you are your OWN importer, insert your own reporting permit number.)

If you have more than 19 invoices, carry the total on line 20 forward to the top of the next page. Continue this procedure until you have reported all purchases. On the last page of BR 1601, the line 20 total will be the accumulated total of all pages of BR 1601.

	NAME	REPORTING PERMIT NUMBER	INVOICE DATE MM/DD/YY	INVOICE NUMBER	TOTAL GALLONS							
	Balance Forward From Previous Page >											
1		•	-	-	•							
2		•	-	-	•							
3		•	•	-	•							
4		•	•	-	•							
5		•	-	-	•							
6		•	•	-	•							
7		•	•	-	•							
8		•	•	-	•							
9		•	•	-	•							
10		•	•	-	•							
11		•	•	-	•							
12		•	•	-	•							
13		•	•	-	•							
14		•	-	-	•							
15		•	-	-	•							
16		•	-	-	•							
17		•	-	-	•							
18		•	=	-	•							
19			-		•							
20	TOTAL - Add lines 1 through 19	IF NOT LAST PAGE, CARRY TO IF LAST PAGE, CARRY THIS AI										

WORKSHEET FORM BR 1601

Report the number of packages of each size in columns 2 through 19 on part a. of each invoice line. Multiply this amount by the conversion factor for the appropriate column and enter on part b. Add the amounts on part b., columns 2 through 19, and enter the total in the TOTAL GALLONS column for each line. CARRY THIS AMOUNT FORWARD TO THE CORRESPONDING INVOICE LINE ON THE FRONT OF THIS FORM. Round to the nearest whole gallon.

			BARRELS						CASES											Odd sizes from BR1605	l
			(2) 31 Gal	(3) 1/2 Bbl	(4) 50	(5) 1/4	(6) 10	(7) 12	(8) 12	(9) 24	(10) 20	(11) 24	(12) 12	(13) 24	(14) 12	(15) 24	(16) 48	(17) 36	(18) 24	(19) Misc	1
		00111/5001011 54 0700			Ltr	Bbl	Gal	32 oz	25 oz	16 oz	16 oz	12 oz	12 oz	11oz	11oz	8 oz	7 oz	7 oz	7 oz	Gal	
	1	CONVERSION FACTOR >	31.	15.5	13.2	7.75	10.	3.	2.34	3.	2.5	2.25	1.13	2.06	1.03	1.5	2.63	1.97	1.31	1.	TOTAL GALLONS
	1	a.																			
		b.																			
	2	a. b.																			
	3	a.																			
		b.																			
	4	a.																			
		b.																			
		a.																			
	5	b.																			
		a.																			
	6	b.																			
	_	a.																			1
	7	b.																			
	8	<u>a.</u>																			
쏪	0	b.																			
INVOICE NUMBER	9	a.																			
	9	b.																			
Į.	10	a.																			
Ö	-	D.																			
\geq	11	a.																			
-		b.																			
	12	a. b.																			
		a.																			
	13	b.																			
		a.																			
	14	b.																			
		а																			
	15	b.																			
		a.																			
	16	b.																			
		a.																			
	17	b.																			
	4.0	a.																			
	18	b.																			
	19	a.																			
	19	b.																			